Labor Organization Officer and Employee Report

U.S. Department of

Office of Labor-Management Standards

abor **Employment Standards Administration**





This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439,440.

Form approved – OMB No. 1215-0188 Expires 07-31-2004

Name and address of person filing		2. Name and address of labor organization		
Christine Kerber, Vice President Local 99 810-A 31st Street 2nd Floor				
Union City, NJ 07087				
Position in labor organization	4. Date fiscal year	ended	5. File number (if as	signed)
Enter appropriate data below if, during the past	12/31/2000 fiscal year, you or yo	ur spouse or minor chil	d directly or indirectly ha	d any of the following in-
terests (except as specified in the exclusions a	et forth in the instruc	tions):		•
 Held an interest in, engaged in transactions employer whose employees your organizat 	(including loans) with ion represents or is a	, or derived income or ctively seeking to represe	other economic benefit of ent.	monetary value from an
			275 Seventh Avenue, New York, NY 10001	11th Floor
7. Nature of Interest, Transaction or Income				
Member of the Board of Directors	of Amalgamated I	Bank and Sharehold	er of same	
B. Held an interest in or derived income or econo from, selling or leasing to, or otherwise dealing seeking to represent, or (2) any part of which o organization or with a trust in which your labor or	with the business of a onsists of buying from	in employer whose empk or selling or leasing direc	yees your labor organization	on represents or is actively
8. Name of business		Address of business		
Amalgamated Bank Of New York			15 Union Square New York, NY 10003	
Business deals with—		10. If 9B or 9C is chec	ked give trust or employer's	s name
☐ A. Labor Organization ☐ B. Trust	☐ C. Employer			
11. Nature and approximate dollar value of such dea	alings			
50 Class A/Voting Shares and 50 A	remco/Preffered	B Shares valued at	\$255.00 per share	
12. Nature of interest held or income received				
\$1 00E 42				S DOLES
\$1,085.43				(DTZQMH)
				QUE DROT
 Received from any employer (other than an any payment of money or other thing of value 	employer covered und	er parts A and B above)	or from any labor relations	consultant to an employer
13. Name and address of employer	or consultant	14. Nature of payment		
None		None		
	¥			
IF MORE	SPACE IS NEEDED	ATTACH ADDITIONAL	. SHEET\$	
 Signature and verification—The undersigned the attachments incorporated therein or referr correct and complete. 	declares, under the a ed to in this report, ha	pplicable penalties of the is been examined by him	law, that all of the informa and is, to the best of his	tion in this report, including knowledge and belief, true,
(1.1///	,, ,	ANY		
Signed: Mist / Cubin	atNew York,	NI	State	on 10/22/03 Date
	~.,			Duto